PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09778131

CLAIMS AS FILED - PART I (Column 1)					(Colun	nn 2)		SMALL ENTITY TYPE			OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			j.H				ſ	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBE	BER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	710.00
то	TAL CHARGEA	in minu	us 20=	* (2		X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS 3 =					*	0		X40=		OR	X80=	
MULTIPLE DEPENDENT CLAIM PRESENT					,			+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter					r "0".in co	olumn 2		TOTAL		OR	TOTAL	710
CLAIMS AS AMENDED - PART (Column 1) (Column						(Column 3)	_	SMALL E	NTITY	OR	OTHER SMALL E	1
AMENDMENT A	· · · · · · · · · · · · · · · · · · ·	CLAIMS REMAINING AFTER AMENDMENT	nge	HIGH NUM PREVI PAID	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
N N	Total	- 14	Minus	/	10	=		X\$ 9=		OR	X\$18=	
AME	Independent	* 3	Minus		3 T.C.I.A.IM	= /		X40=		OR	X80=	,
FIRST PRESENTATION OF MULTIPLE DEPENDENT				CLAIIVI		J	+135=		OR	+270=		
ĭ	V Ways							TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
	(Column 1) (Column 2) (Column 3))			_		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 19	Minus	** (20	= ****		X\$ 9=		OR	X\$18=	
AME	Independent	NTATION OF M	Minus	***	3 TCLAIM	= _	4	X40=		OR	X80=	
L	FIRST PRESE	NTATION OF IV	OLIFEE DEF	ENDEN	CEANN			+135=		OR	+270=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	ımn 2)	(Column 3)					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREV	HEST MBER IOUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Š	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=]	X40=		OR	X80=	
Ľ	FIRST PRESE	ENTATION OF N	MULTIPLE DEI	PENDEN	IT CLAIM			+135=		OR	+270=	
	If the entry in colu	ımn 1 is less than	the entry in colu	ımn 2, wri	te "0" in co	lumn 3.	n "	TOTAL		OR	TOTAL	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

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CLAIMS AS FII				(Column 1) (Column 2)			SMALL ENTITY TYPE (OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS								RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		E	BASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			minus 20=		*			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			minus 3 =		*			X42=		OR	X84=	
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT					+140=		OR	+280=	
* If	the difference	in column 1 is	less than ze	n zero, enter "0" in column 2			L	TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 2)					(Column 3)		SMALL E	ENTITY	OR	OTHER SMALL		
AMENDMENTA		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	* 1d	Minus	**		=		X\$ 9=	•	OR	X\$18=	
	Independent	* L	Minus ***		T CL AIM	= \		X42=		OR	X84=	84
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					· -		+140=		OR	+280=	
						A	TOTAL DDIT. FEE		ÖR	TOTAL ADDIT. FEE		
		(Column 1)		(Colu		(Column 3)						
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	IEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	·
AME	Independent	* NTATION OF MU	Minus	***	CL AIM	-		X42=		OR	X84=	,
	TITIOTTTILLOL		CHI CE DEI	LINDLIN	ODANIVI	<u> </u>	' [+140=		OR	+280=	
								TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu		(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	П	X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF MU	Minus	***	T CL AIM	= [X42=		OR	X84=	
Щ.	THOTFILOL	INTATION OF IM	- ·	LINDLIA	CEANVI		'	+140=		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												